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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/075053	`
	Filing Date	2/13/2002	
	First Named Inventor	Robert C. Stevens	
	Art Unit	3767	_
	Examiner Name	Bhisma Mehta	_
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	ANG-17553	7

I hereby revoke atl previous powers of attorney given in the above-identified application.			
A Power of Attorney is submitted herewith.			
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Tam the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Name William M. Appling			
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Date 18-5ept-07 Telephone 518,798.1215 x 1130			
NOTE. Signatures of all the inventors or sesignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below."			

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